

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

13 NOV 19 PM 4:17  
Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

VIRGIN ISLANDS FOR PLASKETT

ADDRESS (number and street)

P.O. BOX 1006



(Check if address  
is changed)

Frederiksted

CITY ▲

VI

STATE ▲

00841

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address  
is changed)

plaskettforcongress@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address  
is changed)

www.plaskettforcongress.com

2. DATE

11

13

2013

3. FEC IDENTIFICATION NUMBER ►

C 00528182

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michele Hyndman

Signature of Treasurer

Date

11

13

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

## Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

STACEY PLASKETT

Candidate Party Affiliation

Dem

Office Sought:



House



Senate



President

State

VI

District

01

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

## Party Committee:

- (d) ☐ This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

## Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

## Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

## Committees Participating in Joint Fundraiser

- |    |     |               |   |
|----|-----|---------------|---|
| 1. | N/A | FEC ID number | C |
| 2. |     | FEC ID number | C |
| 3. |     | FEC ID number | C |
| 4. |     | FEC ID number | C |

13031141378

Write or Type Committee Name

## VIRGIN ISLANDS FOR PLASKETT

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N/A

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

DELMIN J. GARCIA

Mailing Address

P.O. BOX 583

Frederiksted

VI

00841

Title or Position

CITY

STATE

ZIP CODE

Campaign Manager

Telephone number

340 - 332 - 8868

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

Michele Hyndman

Mailing Address

555 Massachusetts Ave, NW

Unit 1419

Washington

DC

20001

Title or Position

Treasurer

CITY

STATE

ZIP CODE

Telephone number

216 - 650 - 6503

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Full Name of  
Designated  
Agent

Joshua E. Tate

Mailing Address

5013 Chandlers Wharf, Gallows Bay

Christiansted

CITY

VI

STATE

00820

ZIP CODE

Title or Position

Agent of Service

Telephone number

340 - 719 - 0274

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANK OF ST. CROIX

Mailing Address

25 ANCHOR WAY, GALLOWES BAY

Christiansted

CITY

VI

STATE

00820

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13031141380

NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

## OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

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UPS \_\_\_\_\_

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DHL \_\_\_\_\_

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AIRBORNE EXPRESS \_\_\_\_\_

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

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NO POSTMARK



FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

PREPARER

*MN*

DATE PREPARED

*11/19/13*

13051141381

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
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<input type="checkbox"/> Postmark Illegible	
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<input checked="" type="checkbox"/> No Postmark	
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input checked="" type="checkbox"/> Received from Senate Public Records Office	Date of Receipt 11/22/13
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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*JAL*  
PREPARER

11/22/13  
DATE PREPARED